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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* None  
HN

\*\* FOREIGN APPLICATIONS \*\*\*\*\* NO  
HN

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
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35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after	NC	4	23	4
Verified and Acknowledged	Examiner's Signature <i>H. H. H.</i>	Initials <i>HN</i>		

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TITLE  
Location and event triggered notification services

FILING FEE  RECEIVED 844	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____
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